

as corrective physical education and occupational therapy, in keeping with their varying abilities, nor the subject-type equipment particularly needed to aid them in becoming further rehabilitated physically and socially, as well as intellectually. There is no record of home instruction being offered for those so handicapped that they must remain at home.

Apparently no coordinated follow-up work is maintained. All of the different agencies responsible for and concerned with each crippled child's general well-being should develop and promote cooperatively with him a program of living and learning that is best suited to him as a growing and functioning individual. Although the nature and type of the physical defect will determine the possibilities of all phases of development, the maturation and the interests of the child should serve as guides in planning the learning activities. Upon his return to the local school, recommendations should be made by the hospital authorities in cooperation with the local doctor or the school physician regarding exercise, rest periods, nutrition, therapy, and the amount of school work advisable. A transfer report should also be submitted by the principal of the hospital school. Such a procedure would contribute vitally to the continuity of the individual child's educational program. In the case of a regular school entrant, he should be examined carefully by the school physician and similar information given. Thus when the teacher becomes aware of the corrective physical program needed, she can better help in adjusting the educational work to aid in the corrective treatment. It is evident, therefore, that an adequate program for physically handicapped children must be individual and flexible in character in order to permit the desirable adjustments necessary to their specific health requirements, and subsequently, to their all-round growth and development.

Similarly, this type of educational service prescribed for the orthopedic crippled should be broadly and liberally interpreted by school authorities to include the peculiar needs of those atypical children who are handicapped or disabled in any manner, and also those who are gifted. A commitment to the policy that every child should have a chance to live the fullest life of which he is capable makes it mandatory upon us to adapt the school program to his specific difficulty or ability and then help him to make the necessary adjustments directed toward complete living.

Upon close observation and further investigation of the special class work carried forward last year in a number of school systems in various sections of the State, it was found that, on the